IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s):	ST. CYR et al.	Group Art Unit:	1623
Application No.:	10/585,961	Examiner:	Bland, Layla D.
Filed:	September 29, 2008	Docket No.:	365.00060101
		Confirm. No.:	6292
Title:	USE OF RIBOSE FOR RECOVERY FROM ANAESTHESIA		

Commissioner for Patents
Mail Stop Amendment
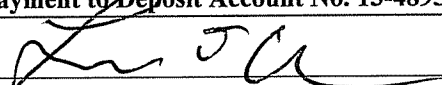P.O. Box 1450
Alexandria, VA 22313-1450

We are transmitting the following documents along with this transmittal sheet:

__X__   **Small entity status is entitled to be asserted in the above-identified application.**

__   A Petition for Extension of Time for __ month(s) (__ pgs). Please charge Deposit Account No. 13-4895 in the amount of $__ for the required fee.

__   An Information Disclosure Statement (__ pgs); copies of __ applications; 1449 forms (__ pgs); and copies of __ documents cited on the 1449 forms.

__   A certified copy of a __ application, Application No. __, filed __, the right of priority of which is claimed under 35 U.S.C. §119.

__X__   Other: Amendment and Response to Restriction Requirement (6 pgs.)

__   Please charge Deposit Account No. 13-4895 in the amount of $__ for the additional claims fees that are calculated below:

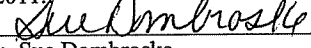| Fee Calculation for Claims Pending After Amendment					
	Pending Claims after Amendment (1)	Claims Paid for Earlier (2)	Number of Additional Claims (1-2)	Cost per Additional Claim	Additional Fees Required
Total Claims	19	20	0	x $26 =	
Independent Claims	4	4	0	x $110 =	
One or More New Multiple Dependent Claims Presented? If Yes, Add $195 Here →					
Total Additional Claim Fees Required					

Please consider this a PETITION FOR EXTENSION OF TIME for a sufficient number of months to enter these papers and please charge any additional fees or credit overpayment to Deposit Account No. 13-4895.

MUETING, RAASCH & GEBHARDT, P.A.
Customer Number: 26813

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